

Work Order ID 87455

\*87455\*

July-19-12 9:50:15 AM

Item ID: D3787-1  
 Revision ID:  
 Item Name: Foot  
 Start Date: 7/10/12 Start Qty: 20.00  
 Required Date: 8/03/12 Req'd Qty: 20.00  
 Reference:

Accept \*N9

Approvals: Process Plan: Date: Tooling:  
 QC: Date: SPC (Y/N):

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours
130 *130* Mill Conv Conventional Milling Machine	CONVENTIONAL MILLING MACHINE  Memo 1- Drill hole to finish size as per dwg D3787 2- Deburr hole as per dwg D3787	0.00 12-08
140 *140* QC Quality Control	QC5- Inspect part completeness to step on W/O  Memo	0.00 SMB 12-8-23
150 *150* Packaging Packaging	Identify as per dwg & Stock Location  Memo	0.00 249A 2-8

Work Order ID 87455

\*87455\*

July-19-12 9:50:15 AM

Item ID: D3787-1  
 Revision ID:  
 Item Name: Foot  
 Start Date: 7/10/12 Start Qty: 20.00  
 Required Date: 8/03/12 Req'd Qty: 20.00  
 Reference:

Accept \*N900040100\* Setup Start \*NS1\*  
 Stop \*NS2\*

Approvals: Process Plan: MLJ Date: 12/07/19 Tooling: Date:  
 QC: Date: SPC (Y/N): Date:

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
100 *100* Purchasing Purchasing	PURCHASING  Memo Issue P/O: 17512 Purchase Part Number: MS22034-1B or BHT P/N 205-070-786-001 Supplier: AUTO PARTS (P/N: 32334) Certificate of conformity is required	0.00 0.00							CA 12/07/20 (20)
110 *110* Packaging Packaging	Receive & Inspect for Damage & Mat'l Certs  Memo Ensure Material Release Note is attached	0.00 0.00							8x 12-8-20
120 *120* QC Quality Control	QC6- Inspect dimensions to drawing  Memo	0.00 0.00							12/08/21

NCR: Yes / No

## WORK ORDER NON-CONFORMANCE

Work Order: _____				DISPOSITION		Skid-tut Machinir Thermoformii Large F	
Part No. _____				Rework <input type="checkbox"/>			
NCR No. _____				Scrap <input type="checkbox"/>			
				Use-as-is <input type="checkbox"/>			
				Work Order Update <input type="checkbox"/>			
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng		
Doc/Data							
Equip/Tooling							
Operator							
Material							
Setup							
Other							
Process							
Supplier							
Training							
Unapproved							
FAULT CATEGORY							
Landing Gear		General		Grain			
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain					
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware					
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection In					
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions					
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance					
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Misread					
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Offset					
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Out of Calib					
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Seq					
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Outside Dir					
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio						

H:/FORMS/Quality Assurance\approved QA/NCRWO Rev G

NCR: Yes / No

## WORK ORDER NON-CONFORMANCE / UPDATE

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____				DISPOSITION		AGAINST DEPARTMENT/PROCESS							
Part No. _____				Rework <input type="checkbox"/>		Skid-tube <input type="checkbox"/>		Crosstube <input type="checkbox"/>		Water Jet <input type="checkbox"/>		Engineering <input type="checkbox"/>	
NCR No. _____				Scrap <input type="checkbox"/>		Machining <input type="checkbox"/>		Small Fab <input type="checkbox"/>		Prod. Eng. Coord. <input type="checkbox"/>		Quality <input type="checkbox"/>	
				Use-as-is <input type="checkbox"/>		Thermoforming <input type="checkbox"/>		Finishing <input type="checkbox"/>		Rec/Store/Packaging <input type="checkbox"/>		Other <input type="checkbox"/>	
				Work Order Update <input type="checkbox"/>		Large Fab <input type="checkbox"/>		Composite <input type="checkbox"/>		Supplier <input type="checkbox"/>			
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector				
Doc/Data													
Equip/Tooling													
Operator													
Material													
Setup													
Other													
Process													
Supplier													
Training													
Unapproved													
FAULT CATEGORY													
Landing Gear				General				Grain					
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain											
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware											
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection In											
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions											
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance											
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Misread											
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Offset											
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Out of Calib											
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Seq											
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Outside Dir											
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio												

H:/FORMS/Quality Assurance\approved QA/NCRWO Rev G

**Work Order ID 87455****\*87455\***

Page 3

July-19-12 9:50:15 AM

Item ID: D3787-1 Accept **\*N900040100\*** Setup Start **\*NS1\***  
Revision ID: Stop **\*NS2\***  
Item Name: Foot  
Start Date: 7/10/12 Start Qty: 20.00 **\*20\*** Cust Item ID:  
Required Date: 8/03/12 Req'd Qty: 20.00 **\*20\*** Customer:  
Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_ Run Start **\*NR1\***  
QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_ Stop **\*NR2\***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
160	QC21- Final Inspection - Work Order Release	0.00							
<b>*160*</b>									
QC	Memo	0.00							
Quality Control									

MLJ 12/08/24  
MF 12-08-23

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>					
<b>Root Cause</b>	<b>Date</b>	<b>Step</b>	<b>Qty</b>	<b>Description of work order update or Non-conformance</b>	<b>Initial Chief Eng</b>	<b>Action Description</b>	<b>Sign &amp; Date</b>	<b>Verification</b>	<b>QC Inspector</b>		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											

FAULT CATEGORY				
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other	

# Picklist Print

July-19-12 9:50:15 AM

Page 1

Work Order ID: 87455

Parent Item: D3787-1

Parent Item Name: Foot

Start Date: 7/10/12

Required Date: 8/03/12

Start Qty: 20.00

Required Qty: 20.00

Comments: IPP Rev:A 08-05-20 new issue DD verified by: LL  
IPP Rev:B 08-06-17 rev.A as per dwg DD verified by:EC

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Rin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
MS220341B Foot		Purchased	No			100	Each	0.0000	1	20		20 8/12-8-20	

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

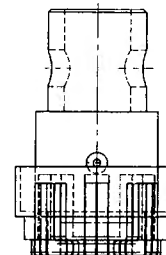
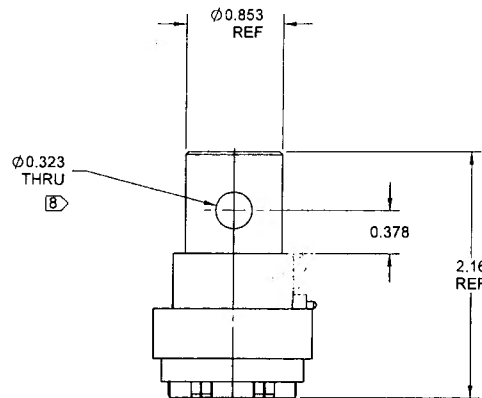
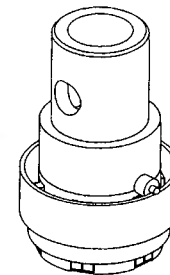
Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>
--	---	---

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

**FAULT CATEGORY**

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions
<div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Ovalized  <input type="checkbox"/> Over/Under tolerance  <input type="checkbox"/> Part Incorrect  <input type="checkbox"/> Part Lost/Missing  <input type="checkbox"/> Part Moved  <input type="checkbox"/> Positioned Wrong  <input type="checkbox"/> Power Loss/Surge           </div> <div> <input type="checkbox"/> Pressure/Forced  <input type="checkbox"/> Temperature/Cure  <input type="checkbox"/> Weld  <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other           </div> </div>		

# SPECIFICATION CONTROL DRAWING



DART PART NUMBER	MILITARY PART NUMBER	BHT PART NUMBER	STUD DIAMETER	FOOT HEIGHT
D3787-1	MS22034-1B	205-070-786-001	Ø0.853	2.16

## D3787-1 FOOT

### NOTES:

- 1) MATERIAL: N/A
- 2) FINISH: N/A
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: N/A
- 7) WEIGHT: 0.13 lbs
- 8) DRILL Ø0.323 HOLE 0.378 FROM SHOULDER, TOUCH UP WITH ALODINE AFTER DRILLING

SHOP COPY  
RETURN TO  
ENGINEERING  
UNCONTROLLED COPY  
SUBJECT TO AMENDMENT  
WITHOUT NOTICE  
WORK ORDER

NO. 87455 MLCJ  
12/07/19

RELEASED  
08-06-16

REV.	NEW ISSUE	DESCRIPTION	HS	08.06.04
DESIGN	HS			
DRAWN	HS			
CHECKED	py			
MFG. APPR.				
APPROVED				
DE APPR.				
DATE	08.06.04			

DART AEROSPACE LTD  
HAWKESBURY, ONTARIO, CANADA

DRAWING NO. D3787  
REV. A  
SHEET 1 OF 1  
TITLE FOOT  
SCALE NTS

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NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>					
<b>Root Cause</b>	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											

FAULT CATEGORY				
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other	





**AUTO PARTS • PIÈCES D'AUTO  
TRUCK PARTS • PIÈCES DE CAMION  
PERFORMANCE PARTS • PIÈCES DE PERFORMANCE  
TIRES • PNEUS**

www.bensonautoparts.com



C-11089

Past due accounts bear 2% interest per month (24% per annum). If this account is placed with a 3rd party collection, an administrative cost of 25% will be added. All exchanges and refund claims must be accompanied by this invoice. Electrical parts not returnable. All parts returned are subject to 20% handling charge. All merchandise sold on this invoice remains the vendor's property until this invoice is paid in full.  
TERMS: Payment due on 10th day of the following month.

Aucun remboursement sans cette facture. Net 30 jours, 2% de frais d'intérêt par mois (24% par année) sur compte en souffrance. 20% de frais de manutention sur toute marchandise retournée. Clause pénale une indemnité de 25% sera chargée sur compte sujet à des procédures légales. Les marchandises mentionnées : cette facture demeurent la propriété du vendeur tant qu'elles ne seront pas entièrement payées. Pièces électriques non-retournable.  
TERMES: Compte payable le 10 du mois suivant.

SIGNATURE \_\_\_\_\_

TVQ: 1016330716 TQ0001 — HST / TPS: 10035 3366 RT00

*Thank  
You*

1000 RUE LANDSDOWNE  
TEL: (613)632-1191

HAWKESBURY, ON K6A 1H7  
FAX: (613)632-2350

*Merc*

WHEELS SHOULD BE TORQUED AFTER 100KMS THANK YOU FOR YOUR BUSINESS

113336 (613)632-5200		113336		DATE 8/20/12 10:00 11MLZZZ											
PART AEROSPACE LTD. 270 ABERDEEN STREET HAWKESBURY ON K6A 1K7		EXPEDITE *** SAME ***		PO: 17512											
ORD / COM	SHIP / EXP	CODE	PART No / PIÈCES	DESCRIPTION	LIST / CHACUN	COST / COÛTANT	EXTENSION								
8	8	TWD>	KIN32334	12 JAW CHR LEG STU BOV: KND	111.60	84.95	679.60								
			direct kinedyne = ms220341b back order 2 week slip # 16552 sales 23986	8/20/12											
			PIECES/CORE TOT												
INVOICE No / FACTURE 11160921		TYPE / SORTE INVOICE		TOTAL		DISC / ESC		FRT / TRANS		HST / TPS		TVQ		AMT to PAY / À PAI CONTINUED	



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PERFORMANCE PARTS • PIÈCES DE PERFORMANCE  
TIRES • PNEUS**

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C-11089

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TERMES: Compte payable le 10 du mois suivant.

SIGNATURE \_\_\_\_\_

TVQ: 1016330716 TQ0001 — HST / TPS: 10035 3366 RT00

*Thank  
You*

1000 RUE LANDSDOWNE  
TEL: (613)632-1191

HAWKESBURY, ON K6A 1H7  
FAX: (613)632-2350

*Merc*

WHEELS SHOULD BE TORQUED AFTER 100KMS THANK YOU FOR YOUR BUSINESS

113336 (613)632-5200		113336		DATE 8/20/12 10:00 11MLZZZ											
PART AEROSPACE LTD. 270 ABERDEEN STREET HAWKESBURY ON K6A 1K7		EXPEDITE *** SAME ***		PO: 17512											
ORD / COM	SHIP / EXP	CODE	PART No / PIÈCES	DESCRIPTION	LIST / CHACUN	COST / COÛTANT	EXTENSION								
			SHIP VIA	242											
INVOICE No / FACTURE 11160921		TYPE / SORTE INVOICE		TOTAL 679.60		DISC / ESC 0.00		FRT / TRANS 0.00		HST / TPS 88.35		TVQ 0.00		AMT to PAY / À PAI 767.95	



Dart Aerospace Ltd.  
1270 Aberdeen Street  
Hawkesbury, ON K6A 1K7  
Tel: 613 632 9577  
Fax: 613 632 1053

## PURCHASE ORDER

Purchase Order ID PO17512

Purchase Order Date 7/20/12

PO Print Date 7/20/12

Page Number 1 of 1

Order From :

VC-AUT001

AUTO PARTS EXTRA  
1000 RUE LANSDOWNE  
HAWKESBURY, ON K6A 1H7  
CA

Contact Name

Vendor Phone

613 632 1191

Vendor Fax

613 632 2350

Vendor Account Nbr

Buyer

Chantal Lavoie

Requisition Nbr

Tax Resale Nbr

10127-2607

Terms

Net 30

Currency

CAD

FOB

Destination-Collect

Ship To :

DART AEROSPACE LTD 1270 ABERDEEN  
HAWKESBURY, ON K6A 1K7  
CANADA

**FAXED**  
6/20/12

Line Nbr	Reference Revision ID Vendor Part Number	Description/ Mfg ID	Req Date/ Taxable	Req Qty/ Unit of Measure	Ship Method	Unit Price	Extended Price
1	MS220341B	Foot	8/17/12 Yes	20.00 Each	Yours ppd	\$84.9500	\$1,699.00

Special Inst: AS PER DWG D3787 REV. A  
B87455  
AUTO PART P/N: 32334

*McC #2 6/27/13*  
*new 8x*

PO Total:

\$1,699.00

*SP 12-8-2e*



Change Nbr: 1

Change Date: 7/20/12

No substitution or deviation without consent.

Certificate of Conformity or Material Certification required ☒ YES ☐ NO

